

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
404371109

Date Received:
09/29/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10705
Name of Operator: EVERGREEN NATURAL RESOURCES LLC
Address: 1775 SHERMAN ST. #2775
City: DENVER State: CO Zip: 80203

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Distribution, Evergreen</u>	<u>719-846-7898</u>	<u>cogcc.evergreen@enrllc.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 716301292
Inspection Date: 07/29/2025 FIR Submit Date: 07/29/2025 FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC Company Number: 10705
Address: 1875 LAWRENCE ST STE 1150
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 308983

Location Name: CAKE WALK-631S66W Number: 29NWSW County: LAS ANIMAS
Qtrqtr: NWS Sec: 29 Twp: 31S Range: 66W Meridian: 6
W
Latitude: 37.315030 Longitude: -104.811300

FACILITY - API Number: 05-071-00 Facility ID: 286165

Facility Name: CAKE WALK Number: 13-29
Qtrqtr: NWS Sec: 29 Twp: 31S Range: 66W Meridian: 6
W
Latitude: 37.315030 Longitude: -104.811300

CORRECTIVE ACTIONS:

1 CA# 206551

Corrective Action: Calibrate gas metering equipment annually to comply with rule 430.d.(1). Date: 08/29/2025

Response: CA COMPLETED Date of Completion: 09/26/2025

Operator Comment: Calibration performed per rule 430.d(1)

ECMC Decision: _____

ECMC
Representative:

2 CA# 206552

Corrective Action: SOIL PER RULE 1002..(2).D & 1002.f.(2)B, Comply with general provisions of the oil and gas act for wildlife protection AND SB-181.

Date: _____

Response: CA COMPLETED

Date of Completion: 09/26/2025

Operator
Comment: Stained soil cleaned and removed per rule 1002.(2)D and 1002.f(2)B

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tracy Dyke

Signed: _____

Title: Construction Technician

Date: 9/29/2025 7:10:52 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
404371109	FIR RESOLUTION SUBMITTED
404371111	Calibration performed
404371113	Oil stains cleaned and removed

Total Attach: 3 Files